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UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	PULLEYN et al.	Examiner:	Kenny S. Lin		
Application No.:	10/799,033	Art Unit:	2152		
Filed:	March 12, 2004	Docket No.:	INFOP004C1		
Title:	DOMAIN NAME SERVICE SERVER				

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Commissioner for Patents, Mail Stop RCE, P.O. Box 1450, Alexandria, VA

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FILED WITH AMENDMENT E

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114 Previously submitted: Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____ b. Enclosed: 0/10/2007 EAYALEW1 00000072 500605 Amendment/Reply Affidavit(s)/Declaration(s) Information Disclosure Statement (IDS) Other

ATTORNEY DOCKET NO. INFOP004C1 Application No.: 10/799,033

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Fee Calculation: The fee for excess claims, if applicable, has been calculated as c. shown below.

				Small Entity			Large Entity	
				Rate	Fee		Rate	Fee
RCE FILING FEE			x \$405 = \$		OR	x \$810 = \$	810.00	
CLAIMS	After RCE	*HP	Extra					
Total	66	69		x \$25 = \$		OR	x \$50 = \$	
Independent	3	6		x \$105 = \$		OR	x \$210 = \$	
Multiple Dependent Claims -0-			x \$185 = \$		OR	x \$370 = \$		
*HP = Highest previously paid				TOTAL FEES \$	<u> </u>		TOTAL FEES \$	810.00

2.	Miscellaneou	
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a.	Suspension of action on the abo	ve-identified application is requested under
	37 CFR §1.103(c) for a period of	months.
h	Other	

X 3. Applicant hereby petitions for an extension of time as follows:

	SMALL ENTITY			LARGE ENTITY	
	Rate	Add'l Fee		Rate	Add'l Fee
Extension for Response within FIRST month	x \$60 = \$		OR	x \$120 = \$	120.00
Extension for Response within SECOND month	x \$230 = \$		OR	x \$460 = \$	
Extension for Response within THIRD month	x \$525 = \$		OR	x \$1050 = \$	
Extension for Response within FOURTH month	x \$820 = \$		OR	x \$1640 = \$	
Extension for Response within FIFTH month	x \$1115 = \$		OR	x \$2230 = \$	

4	\boxtimes	Applicant(s) hereby petition that any additional required extension of time be granted.
т.		applicant(s) hereby petition that any additional required extension of time be granted.

- Enclosed is our Check No. __ in the amount of \$_____ to cover the RCE Fee 5. required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.
- Please charge Deposit Account No. 50-0685 (INFOP004C1) in the amount of \$930.00 to cover the additional claim fee and/or extension of time fees.
- If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (INFOP004C1).
- Applicant Initiated Interview Request Form. 8.
- 9. 冈 Please continue to send correspondence to the following address:

CUSTOMER NO. 21912

VAN PELT, YI & JAMES LLP

10050 N. Foothill Blvd., Ste. 200

Cupertino, CA 95014

Tel (408) 973-2585 Fax (408) 973-2595

Date:	10-5	-2007	

Clover Huang

Reg. No. 55,285